



## Enrollment Action Checklist (**VALUE FIVE**) For State Non-Medicare Eligible Pensioners

2018 Benefits Open Enrollment Period: May 7 – 25, 2018  
Coverage Effective Date: July 1, 2018

***This is your once-a-year opportunity to enroll or cancel coverage, change plans and add or drop coverage for your eligible spouse and/or dependent children.***

**Have questions about Open Enrollment or your benefits?**

Contact the Office of Pensions at (302) 739-4208 or 1-800-722-7300.

### What You Need To Know For This Open Enrollment:

- The State of Delaware wants you to take action this May to make sure you are enrolled in the benefit plans that provide the **BEST VALUE** for you and your family! Getting the **BEST VALUE** means reviewing your benefit options (what do the plans offer, what providers are in the plan's network and how much will services cost?) and making informed decisions about what plans are most affordable and aligned with your needs. Making informed decisions regarding your benefit plan selections is an important step to help control rising health care costs and to maintain high quality, affordable options.
- The benefit plan premiums (or rates) for the health, dental and vision plans will not change on July 1, 2018; however, there are a number of health benefit design changes intended to help you obtain the same level of quality and service at reduced costs to you and the State of Delaware. **Learn *What's New* by viewing the online mini-videos or visiting an upcoming health fair.**

### What You Need To Do (Follow the checklist below):

***Actively participate*** in Open Enrollment between **May 7 – 25, 2018** by completing the **VALUE FIVE CALL TO ACTION** steps:

- ☐ **1. Visit** the Office of Pensions website at [delawarepensions.com](http://delawarepensions.com) or the Statewide Benefits Office (SBO) website at [de.gov/statewidebenefits](http://de.gov/statewidebenefits) (select "Open Enrollment").
- ☐ **2. Access myBenefitsMentor** to estimate your upcoming health care expenses and find the best match health plan (*based on your needs and your costs*).
- ☐ **3. Look** at your options for dental and vision coverage as well.
- ☐ **4. Update/make changes** to your health, dental and/or vision coverage if you wish, by completing and submitting the necessary forms to the Office of Pensions **by May 25, 2018** (*forms are included in the packet mailed to your home and also located on the [Office of Pensions website](http://Office of Pensions website)*).
  - When submitting your forms to the Office of Pensions, choose one of the following options:
    - ☐ Scan and e-mail to [pensionoffice@state.de.us](mailto:pensionoffice@state.de.us)
    - ☐ Fax to (302) 739-6129

- ☐ Mail to Office of Pensions, McArdle Building, 860 Silver Lake Blvd, Ste 1, Dover, DE 19904-2402

**IMPORTANT:** If you are not making updates/changes, you **DO NOT** need to submit these forms.

- ☐ If enrolling a dependent child for the first time, you **MUST** supply additional documentation (*Dependent: Copies of birth certificate and Social Security cards and other legal documents as required*) to the Office of Pensions. Complete a Dependent Child Coordination of Benefits (DCOB) Form **ONLY** if you are newly enrolling a dependent(s) on your health (Aetna or Highmark Delaware) plan for July 1, 2018 **AND** the dependent(s) have other health coverage. *The DCOB Policy and Form are located on the [SBO website](#).*
  - **Please note: Spouses and dependents who become eligible for Medicare, based on age or disability, are required to enroll in Medicare Parts A & B insurance and notify the Office of Pensions within 30-days of becoming eligible/enrolled in order to maintain coverage under the Group Health Insurance Plan (GHIP).**
- ☐ If enrolling a spouse for the first time, you **MUST** supply additional documentation (*i.e., copy of marriage/civil union certificate and Social Security card as required*) to the Office of Pensions.
- ☐ If enrolling in an HMO plan, make sure your health or dental provider participates in the plan's network and that they are accepting new patients **before you enroll**. For the Aetna HMO Plan, you are **required** to select a Primary Care Provider (PCP) for you and each covered dependent and for the Dominion National HMO Select Dental Plan you are **required** to select a Primary Care Dentist (PCD) for you and each covered dependent. There are no out-of-network benefits in an HMO plan and you cannot change plans during the plan year if your provider decides to no longer participate in the plan.
- ☐ 5. Enter the online [Spousal Coordination of Benefits \(SCOB\) Form](#) and complete it between **May 7 – 25, 2018** (*a new form **MUST** be completed each year during Open Enrollment or your spouse's coverage will be reduced*).

**IMPORTANT:** Complete the SCOB Form only if you cover your spouse on your non-Medicare health plan (Aetna CDH Gold Plan, Aetna HMO Plan, Highmark First State Basic Plan or Highmark Comprehensive PPO Plan) effective July 1, 2018.

### ***Other Benefits Available During Open Enrollment:***

- ☐ To join Blood Bank of Delmarva's **Members For Life** program, create an account with Blood Bank of Delmarva at <https://donate.bbd.org/>. Participation is easy. Donate blood at least once a year and allow the Blood Bank to contact you when there is a need for your blood type.